STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964582	**04/08/2015**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
CREEKSIDE SENIOR VILLAGE	**9015 UNIVERSITY PARKWAY PENSACOLA, FL 32514**	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 - Initial Comments

An unannounced Extended Congregate Care monitoring visit in conjunction with CCR # 2015002047 and 2015001086 was conducted at Creekside A Pacifica Senior Living community on 4/7-8/2015. Deficient practice was not found for the monitoring visit but was found for CCR #2015001086.

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

April 9, 2015

Administrator
Creekside Senior Village
9015 University Parkway
Pensacola, FL 32514

RE: ECC MONITORING

Dear Administrator:

This letter reports findings of a state licensure survey that was conducted on April 8, 2015 by representative(s) of this office. Attached is the provider's copy of the State (5000-3547) Form, which indicates there were no discernible deficiencies noted as a result of the ECC monitoring.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at http://ahca.myflorida.com/Publications/Forms.shtml as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor(s). Should you have any questions please call me at 850-412-4540.

Sincerely,

Dorian Heiberg, MSW
Field Office Manager

DH/dh
Enclosure

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